Please type a plus sign (+) inside this box -> -
--

ΩR

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

M Declaration Submitted with Initial

Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) reguired)

Attorney Docket Num	ber	RP990002US	
First Named Inventor		Ford OXAAL	
COMPLE	TE I	F KNOWN	
Application Number		/	
Filing Date			
Group Art Unit			
Examiner Name			

As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD FOR INTERACTIVELY VIEWING FULL-SURROUND IMAGE DATA AND APPARATUS THEREFOR the specification of which (Title of the Invention) X is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? Prior Foreign Application Foreign Filing Date Priority Country (MM/DD/YYYY) Not Claimed Number(s) YES NO $\overline{\Box}$ $\overline{\Box}$ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application 60/006,800 numbers are listed on a 11/15/1995 supplemental priority data sheet 60/071,148 01/12/98 PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

	PTO/SB/01 (12:97)
Please type a plus sign (+) inside this box -= -	Approved for use through 9/30/00. QMB 0651-0032
	Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons	sare required to respond to a collection of information unless it contains

LUEVE	AHAIION	<u> – Othity</u>	OF	hesio	n Pate	III A	ppII	çauc	<u> </u>	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States or America, listed below and, Insoter as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manny provided by the first paragraph of 35 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application.					signating the in the prior y to disclose r application					
U.S. Parent Application or PCT Parent Number				Parent Filing Date Par (MM/DD/YYYY)				ent Patent Number (if applicable)		
09/228	,760	,					43,09			
08/749,166				11/14/1996 5,903			3,78	·		
Additional U.S.	or PCT International applica	tion numbers are	listed on a	a supplemen	tal priority data	sheet PTO	/SB/02B	attached I	nereto.	
às a named inventor	I havehus supported the following	na roalstorad or	antill anar/a							
and Trademark Office	connected therewith:	Customer Numb	rer	*		→	1	Vace Cust	omer	
İ	Xi	OR Registered prac			ntina munitant ta	end below) M	umber Bar Jahel he		
N	ame	Registered prac	ation	Heat less testinati	Nam			Registration Number		
Robert A, W	esterlund	31.439								
Raymond H. J. Powell, Jr. 34,231										
Additional registor	rod practitioner(s) named o	o supplementa! i	Benistered	Prectitioner	information she	et PTO/SE	VN2C att	ached hor	7fo.	
Direct all correspon				1 10011101101	 -					
Direct di correspo		ner Number Code Label			OR	Corr	espond	ence add	ress bolow	
Name Westerlund & Powell, P.C.										
Address 122	N. Alfred Stree	t								
Address										
City Ale	exandria			State	VA	ZIP 2	2314	314-3011		
Country US		Telephon						06-580		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that withit false statements and the like so made are purishable by tine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
Name of Sole or First Inventor:										
Given Name (first and middle [if anv]) Family Name or Surgame										
Ford OXAAL										
Inventor's Signature					6/4/1					
Residence: City	es: City Cohoes State NY Country USA Ginizanship US				US					
Post Office Address 42 Western Avenue										
Post Office Address										
City	Cohoes 5tate	NY	ZIP	1204	17	Country	, t	JSA		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto										

Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT CLAIMING 5MA (37 CFR 1.9(f) & 1.27(b))-IND	Docket Number (Optional) RP990002US						
Applicant, Patentee, or Identifier, Ford OXAAL							
Application or Patent No.: New Application							
FiledorIssued: New Applic	Filedorlssued: New Application						
Title: METHOD FOR INTERACTIVELY VIEWING FULL-SURROUND							
IMAGE DATA AND	APPARATUS THEREFOR						
As a below named inventor, I hereby state that I qualify as an Independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:							
x the specification filed herew	vith with title as listed above.						
the application identified ab	the application identified above.						
the patent identified above.							
I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).							
Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:							
No such person, concern,	, or organization exists.						
Each such person, conce	m, or organization is listed below.						
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))							
Ford OXAAL NAME OF INVENTOR Signature of Inventor	NAME OF INVENTOR Signature of inventor	NAME OF INVENTOR Signature of inventor					
Date Date							

Surden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the smount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.